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## APPLICATION FOR UNITED STATES PATENT DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

MAGNETIC GARNET SINGLE-CRYSTAL FILM AND METHOD OF PRODUCING

invention entitle	d: MAGNETIC GARNET SINGLE-CRYSTAL FILM AND METHOD OF PRODUCING
	THE SAME, AND FARADAY ROTATOR COMPRISING THE SAME
described and cl	aimed in the specification:
Check one	
*a.	☑ attached hereto.
b.	filed on as Application No and amended on (if applicable).
	-
I herel	by state that I have reviewed and understand the contents of the above-identified specification, including the claims

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) and/or United States provisional application(s) filed within one year prior to this application are hereby claimed:

Country

Application No.

Filing Date

JAPAN

2000-081044

March 22, 2000

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to this application, or (b) before the filing date of the above-named foreign priority application(s) and/or United States provisional application(s):

I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent Office:

James A. Oliff, Reg. No. 27,075; William P. Berridge, Reg. No. 30,024; Kirk M. Hudson, Reg. No. 27,562; Thomas J. Pardini, Reg. No. 30,411; Edward P. Walker, Reg. No. 31,450; Robert A. Miller, Reg. No. 32,771 and Mario A. Costantino, Reg. No. 33,565.

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, P.O. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (703) 836-6400.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Typewritten Full Name of First or Sole Inventor  **Inventor's Signature:		Atsushi		Ohido
		Given Name <b>Ataushi</b>	Middle Initial	Family Name Ohido
**Date of Signature	:	January	3 <i>0</i>	2001
		Month	Day	Year
Residence:				
	Cit	y	State or Province	Country
Citizenship:	Japane	se		
	Post Office Address: (Insert complete	c/o TDK Corp	oration, 1-13-1,	Nihonbashi,
	mailing address, including country)	Chuo-ku, Tok	yo, 103-8272, Jap	oan

<sup>\*</sup>If Box (a.) is checked, this form may be executed only when attached to the specification (including claims).

<sup>\*\*</sup>Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.

## PAGE 2 OF U.S.A. DECLARATION FORM (Discard this page in a sole inventor application)

	Typewritten Full N	ame			
	of Second Joint In	ventor (if any)	Kazuhito		Yamasawa
	**Inventor's Signata	ıre:	Given Name Xazuhik	Middle Initial	Family Name (Yamasawa)
	**Date of Signature		January	30	2001
		-	Month	Day	Year
	Residence:				
	Citizenship:	City Japanese		State or Province	Country
	Citizensinp.	Post Office Address:			
		(Insert complete	c/o TDK Cor	poration, 1-13-	1, Nihonbashi,
		mailing address, including country)	Chuo-ku, To	okyo, 103-8272,	Japan
	Typewritten Full N	ame			
	of Third Joint Inve			20111	70 11 NI
	****		Given Name	Middle Initial	Family Name
	**Inventor's Signatu				
	**Date of Signature			Day	Year
	Residence:	Month		Бау	1 Cai
dide of the state three states of the	Residence.			State or Durving	Country
	Citizenship:	City		State or Province	Country
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:		mailing address,			
		including country)			
	Typewritten Full N of Fourth Joint In				
	09 1 02.000 00000 200		Given Name	Middle Initial	Family Name
	**Inventor's Signat	ure:	GIVEN I TAIME	iviladio ilitiai	1 0111111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	**Date of Signature				
	Date of Signature	<u> </u>	Month	Day	Year
:	Residence:				
	Tebradice.	City		State or Province	Country
	Citizenship:				
		Post Office Address:			
		(Insert complete mailing address,			
		including country)			
	Typewritten Full N	Vame			
	of Fifth Joint Inve			and the second s	
			Given Name	Middle Initial	Family Name
	**Inventor's Signat	ure:			
	**Date of Signatur	e:			
	Z	<del></del>	Month	Day	Year
	Residence:				
		City		State or Province	Country
	Citizenship:				
	Post Of	ffice Address: (Insert complete			
		mailing address,			
		including country)			

<sup>\*\*</sup>Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form of the application to which it pertains.